LANDMAN TELLER JR.
M JAMES CHANEY JR
DOUGLAS E HASSELL
B BLAKE TELLER
W BRIGGS HOPSON III*
KATHLEEN M FITZGERALD
* ALSO ADMITTED IN LOUISIANA

LAW OFFICES OF
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LANDMAN ——— 987+   995)
M EMMETT WARD (1909-1989

March 7, 2003

Federal Communications Commission
Office of Secretary
445-12th Street SW
Washington, DC 20554

Via facsimile: 202-418-0187

> re: **CC Docket Nos. 96-45 and 97-21**
> **Supplement to Appeal of SLD Rejection of Appeal**
> **Billed Entity - 128637**
> **471 Application Number - 265505**
> **Funding Request Numbers - Unassigned**

Dear FCC Appeal Agent:

My firm represents the Vicksburg Warren School District. It has recently come to my attention that the Vicksburg Warren School District's application for E-RATE funds for the 2001-2002 school year was denied for failure to submit necessary information. The Director of Information Management appealed the denial to the SLD and the rejection of the application was affirmed. I understand that the final appeal is currently pending in your office. I am hopeful that you will allow me to submit additional information on behalf of the Vicksburg Warren School District.

I am enclosing the information that was inadvertently left out of the original form 471 application. I ask that you review this information along with the Vicksburg Warren School District's stated reason for not originally providing it. As the appeal states, the request for the information was lost during the facsimile transmission and was therefore not received. I ask that you not hold the school district responsible for this mechanical error. Essentially, I ask that you waive the time limitation in which to submit the application and accept the now completed application in its entirety.

A waiver of the filing deadline may be granted upon a showing of good cause, that special circumstances warrant a waiver, and that a deviation would better serve the public interest than strict adherence to the general rule. See 47 C.F.R. §1.3; Northeast Cellular Telephone Co. v. FCC, 897 F.2d 1164, 166 (D.C. Cir. 1990). Such circumstances certainly exist in this case.

The Vicksburg Warren School District has always promptly responded to requests for information. It is only due to an unfortunate mechanical error that said requests were not received in the instant case. In the original appeal the SLD offered a successful transmission report as proof of the school district's receipt of the information. However, said report proves

only that the transmission from the SLD was successful. The report does not prove that the school district's receipt of the transmission was successful. The lost transmission may be due to any number of factors including, but not limited to: electrical problems, equipment problems, and acts of God. **All** of these factors are extraordinary circumstances that could not have been foreseen by the school district.

The Vicksburg Warren School District relies heavily on E-RATE funds and the loss of them will deal a devastating blow. In school districts as poor as the ones here in Mississippi, all grant money and government funding is vitally necessary to the everyday operations of the schools. Our schools have made great strides in seeking funding for the sole purpose of acquiring the technology that is needed to give our students a chance in today's working world and remove them from the circle of poverty and welfare dependance that their families have previously known. The public interest is undoubtedly better served by overlooking strict adherence to the deadline requirements and by accepting the school district's completed application.

For these reasons, I ask that you accept the Vicksburg Warren School District's completed form 471 and grant them E-Rate funding for the 2000-2001 school year. Please call if you have any questions or need any additional information.

Sincerely,

Kathleen M. Fitzgerald

FCC Form 471

Approval by OMB
3060-0806

Sc ... vice
Sen ... rm 471
rs

This form asks Schools and librari~~...~~ ... ave ordered and estimate the annual
charges for them so that the Fund ... riders for services.

Please read Instructio~~...~~ ~~...~~ application. (See www.sl.universalservice.org for filing this form online)

Applicant's Form Identifier: __YR 4_____
(Create your own code to identify THIS Form 471)

Block 1: Billed Entity Information

(The "Billed Entity" is the entity paying the bills for the services listed on this form.)

1 Name of Billed Entity (30 characters max.) **Vicksburg WArren school District**

2 Funding Year: July 1, **2001** through June 30, **2002** | 3 Entity Number (up to 10 digits) **128637**

4a Street Address, P.O. Box, **1500 mission 66**
    or Route Number

City **Vicksburg** | State **MS** | Zip Code **39180____**

b Telephone Number (10 digits + ext.) **(601) 638-5122** ext. _____

c Fax Number (10 digits) **(601) 631-2819**

d E-mail Address (50 characters max.) **hugh 3VWsd. K12. MS. US**

5 Type of Application
- [ ] School (public or non-public school)
- [x] School District (LEA public or non-public (e.g., diocesan) local district representing multiple schools)
- [ ] Library (library (i.e. outlet/branch, system))
- [ ] Consortium [ ] Check here if any members of this consortium are ineligible non-governmental entities.

6a Contact Person's Name **Hugh Cummings**

First, fill in every item of the Contact Person's information below that is different from Item 4, above.
Then check the box next to the preferred mode of contact. (At least one box MUST be checked.)

b [ ] Street Address, P.O. **689 Hwy 27 South**
    Box, or Route Number

city **Vicksburg** | state **MS** | Zip Code **39180.____**

c [ ] Telephone Number (10 digits + ext.) **(601) 631-2821** ext. _____

d [x] Fax Number (10 digits) **(601) 631-2917**

e [ ] E-mail Address (50 characters max.) **hugh 3VWsd. k12. ms. US**

f Ho day/vacation, summer contact information.

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block 2: Minor Modification to Existing Contract?

7 [ ] Check if this Form 471 represents a minor modification, such as a modification of services, to
a Form 471 for which you already have a Receipt Acknowledgement Letter. Provide the data requested below,
attach a Description of Services highlighting the modified service, and sign Block 6.

Form 471 Application #: [   ] Funding Request Number: [   ]

Minor modification requests can be filed MANUALLY only. Please see www.sl.universalservice.org for filing instructions.

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IF THIS APPLICATION INCLUDES...	BEFORE ORDER	AFTER ORDER
a (Schools/districts/consortia only) Telephone service How many classrooms had phone service before and after your order?	190	190
b High-ban —— voice/data/video service How many buildings served before and after your order?	1	1
c High-bandwidth voice/data/video service: Highest speed to a building before and after your order?	10 mb/s	10 mb/s
d Dial-up Internet connections: How many before and after your order?	12	12
e Dial-up Internet connections: Highest speed before and after your order?	56 kb	56 kb
f Direct connections to the Internet: How many before and after your order?	17	17
g Direct connections to the Internet Highest speed before and after your order?	10 mb/s	10 mb/s
.. Internet access (for schools): How many rooms have Internet access before and after your order?	611	611
i Internet access (for libraries): How many buildings have Internet access before and after your order?		
j Internet access: How many computers (or other devices) with Internet access before and after your order?	450	450
k Other technology outcomes (please specify)		

Block 4: Discount Calculation Worksheets (pages 3a, 3b, and 3c)

The following 3 pages (3a, 3b, and 3c) are Block 4 worksheets for use in calculating your discount for services. You will complete one or more depending on the type of application you are filing. Each worksheet has instructions.

- If you are filing as a school or a school district, use Worksheet A (page 3a).

- If you are filing as a library (i.e. outleffbranch. system), use Worksheet B (page 3b).

- If you are filing as a consortium, use Worksheet C (page 3c), and include as many Worksheets A and B as you need for back-up documentation.

Block 4: Discount Calculation Worksheet A
for Schools/School Districts

Worksheet #A- _1_

Page __2__ of _2_

Instructions: If you are filing a School/School District application, use this worksheet to calculate the discount rate for site-specific services and/or to determine the weighted average discount calculations for shared services.

(For Administrator's Use)

10a If you are:
- Applying for discounts ONLY for an individual school. or ONLY site-specific services: Complete columns 1-7 only for each school. Add and number pages as needed. Then use each school's Entity Number and its discount from Column 7 to complete Block 5 site-specific service to that school.
- Applying for discounts on services shared by ALL schools in the district (with or without site-specific services as well): Complete all columns 1-8 for all schools in the district. Then use the Weighted Average Discount in 10-c (below) to complete Block 5 for shared services.
- Applying for discounts on different shared services shared by different groups of schools (with or without site-specific services as well): Complete one worksheet. columns 1-8 PLUS 10c, for EACH different group of schools sharing a service. Designate this worksheet A-1, A-2, A-3, etc.

10b List entities and calculate discount(s).

School District Name: _Vicksburg Warren_   School District Entity Number: _128637_

1	2	3	4	5	6	7	8
Name of Eligible School	Entity Number	Urban or Rural U or R	Total # of Students	# of Students Eligible for NSLP	% Students Eligible for NSLP (Col. 5 ÷ Col. 4)	Discount % from Discount Matrix	Weighted Product for Calculating Shared Discount (Col. 4 x Col. 7)
Warrenton Elem	43374	R	459	348	76 75.516%	90	413
Warren Central Intermediate	212046	R	698	388	56 55.587	80	558
Alternative School	43360	R	254	205	81 80.708%	90	229
South Park Elem.	43377	R	536	362	68 67.537	80	429
Beechwood Elem	43375	R	611	510	83 83.469%	90	550
Totals for calculating Weighted Average Discount							7145

10c Weighted Average Discount % for Shared Services (Col. 8 total divided by Col. 4 total. Round to nearest %) ➝ **78%**

Block 4: Discount Calculation Worksheet A
for Schools/School Districts

Worksheet #A-__1__

Page __1__ of __2__

Instructions: If you are filing a School/School District application, use this worksheet to calculate the discount rate for site-specific services and/or to determine the weighted average discount calculations for shared services.

▓▓▓▓▓▓▓▓▓▓ (For Administrator's Use)

10a If you are:

- o Applying for discounts **ONLY** for **an** individual school, **or ONLY** site-specific services: Complete columns 1-7 only for each school. Add and number pages as needed. Then use each school's Entity Number and its discount from Column 7 lo complete Block 5 site-specific service lo thal school.
- ● Applying for discounts on **services** shared by **ALL** schools in the district (with or without site-specific services as well): Complete all columns 1-8 for **all** schools in the district. Then use the Weighted Average Discount in **10c** (below) to complete **Block** 5 for shared services.
- o Applying for discounts on **different shared services** shared by different **groups** of schools (with or without site-specific **services** as well): Complete one worksheet, columns 1-8 PLUS 10c, for **EACH** different group of schools sharing a service. Designate *this* worksheet A-1, A-2, A-3, elc.

10b List entities and calculate **discount(s)**.

School District Name: __Vicksburg Warren__   School District Entity Number: __128637__

1 Name of Eligible School	2 Entity Number	3 Urban or Rural U or R	4 Total # of Students	5 # of Students Eligible for NSLP	6 % Students Eligible for NSLP (Col. 5 ÷ Col. 4)	7 Discount % from Discount Matrix	8 Weighted Product for Calculating Shared Discount (Col. 4 x Col. 7)
Bowmar Ave	43368	R	315	167	5 53.05%	80	252
Dana Rd. Elem.	212043	R	693	478	6 68.975%	80	554
Vicksburg Intermediate	212044	R	691	411	5 59.47%	80	553
Vicksburg High	43370	R	1135	510	4 44.933%	70	795
Vicksburg JR. High	43365	R	707	411	5 58.13%	80	566
Sherman Ave Elem.	212045	R	717	519	72 72.35%	80	574
Redwood Elem	43331	R	428	284	66 66.355%	80	342
Warren Central High	43376	R	1207	515	43 42.667	70	845
Warren central Junior	43366	R	694	338	49 48.7032	70	486
Totals for calculating Weighted Average Discount	▓▓▓				▓▓▓	▓▓▓	

10c Weighted Average Discount % for Shared Services (Col. 8 total divided by Col. 4 total. Round to nearest %) ➡️

IBlock 5: Discount Funding Request(s)

Block 5, page __1__ of __2__

IInstructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.
Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly.

FRN# (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) ☑ Telecommunications Service ○ Internet Access ○ Internal Connections	**15 Contract Number** (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions) _MS985477-00_
	16 Billing Account Number (e.g., billed telephone number)
12 Form 470 Application Number (15 digits) _299860000337727_	**17 Allowable Vendor Selection/Contract Date** (mm/dd/yyyy) (based on Form 470 filing) _10/2/98_
13 SPIN - Service Provider Identification Number (9 digits) _143004824_	**18 Contract Award Date** (mm/dd/yyyy) _12/15/99_
	19a Service Start Date (mm/dd/yyyy) _7/1/2001_
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) _6/30/2002_
14 Service Provider Name _BellSouth_	**20 Contract Expiration Date** (mm/dd/yyyy) _12/31/05_

21 Description of This Service:	You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment # _1_

22 Entity/Entities Receiving This Service:	a. If the service is **site-specific** (provided to one site and not shared by others), list the Entity Number of the entity from Block 4 receiving this service : _____ b. If the service is shared by all entities on a **Block** 4 worksheet, list the worksheet number (e.g., A-1): _A-1_

23 Calculations

	Recurring Charges				Non-Recurring Charges			Total Charges		
A	**B**	**C**	**D**	**E**	**F**	**G**	**H**	**I**	**J**	**K**
Monthly $ charge (total amount per month for service)	How much of the $ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount $ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) $ charges	How much of the $ amount in (F) is ineligible?	Annual eligible pre-discount $ amount for one-time charges (F minus G)	Total program year pre-discount $ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment Request (I x J)
5944.37	0	594437	12	71332.44				71332.44	78	55639.03

Block 5: Discount Funding Request(s)

Block 5, page _2_ of _2_

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.
Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly.

FRN # ████████████ (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) ☑ Telecommunications Service ☐ Internet Access ☐ Internal Connections	**15** Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions) _T_
	16 Billing Account Number (e.g., billed telephone number) _601-638-5122_
12 Form 470 Application Number (15 digits) _299860000337727_	**17** Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) _01/16/01_
13 SPIN - Service Provider **Identification Number** (9 digits) _143004824_	**18** Contract Award Date (mm/dd/yyyy) _09/25/96_
	19a Service Start Date (mm/dd/yyyy) _12/1/2000_
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) _6/1/2001_
14 Service Provider Name _BellSouth_	**20** Contract Expiration Date (mm/dd/yyyy) _09/25/01_

21 Description of This Service:	You **MUST** attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment# _2_____
22 **Entity/Entities** Receiving This Service:	**a** If the service is site-specific (provided to one site and not shared by others), list the Entity Number of the entity from Block 4 receiving this service : _____ **b.** If the service is shared by all entities on a Block 4 worksheet, list the worksheet number (e.g., A-1): _A-1_____

23 Calculations

	Recurring Charges				Non-Recurring Charges			Total Charges		
A	**B**	**C**	**D**	**E**	**F**	**G**	**H**	**I**	**J**	**K**
Monthly $ charges (total amount per month for service)	How much of the $ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount $ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) $ charges	How much of the $ amount in (F) is ineligible?	Annual eligible pre-discount $ amount for one-time charges (F minus G)	Total program year pre-discount $ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment $ Request (I x J)
7595.33	0	7595.33	12	91143.96				91143.96	78	71092.29

Entity Number __123637__   Applicant's Form Identifier __VRV__
Contact Person __Hugh Cummings__   Phone Number __601-631-2821__

Block 6: Certifications and Signature

24 The entities listed in Block **4** of this application are eligible for support because they are: (Check one or both.)

    a ☒ schools under the statutory definitions of elementary and secondary schools found in the Elementary and Secondary Education Act of 1965, 20 U.S.C. Secs. 8801(14) and **(25)**, that do not operate as for-profit businesses and do not have endowments exceeding $50 million; and/or

    b ☐ libraries or library consortia eligible for assistance from a State library administrative agency under the Library Services and Technology Act of 1996 that do not operate as for-profit businesses and whose budgets are completely separate from any schools, including, but not limited to, elementary and secondary schools. colleges. or universities.

25   The eligible schools and libraries listed in Block **4** of this application have secured access to all of the resources, including computers. training, software, maintenance, and electrical connections necessary to make effective use of the services purchased as well as to pay the discounted charges for eligible services.

26 All of the schools and libraries or library consortia listed in Block 4 of this application are covered by:

    a ☐ an individual technology plan for using the services requested in this application; and/or

    b ☒ higher-level technology plan(s) for using the services requested in this application; or

    c ☐ no technology plan needed; applying for basic local and long distance telephone service only.

27 Status of technology plans (if representing multiple entities with mixed technology plan status, check both a and b):

    a ☒ technology plan(s) has/have been approved; and/or

    b ☐ technology plan(s) will be approved by a state or other authorized body; or

    c ☐ no technology plan needed; applying for basic local and long distance telephone service Only.

28   I certify that the entities eligible for support that I am representing have complied with all applicable state and local laws regarding procurement of services for which support is being sought.

29   I certify that the services the applicant purchases at discounts provided by **47** U.S.C. Sec. **254** will be used solely for educational purposes and will not be sold, resold. or transferred in consideration for money or any other thing of value.

30   I certify that the entity(ies) I represent has complied with all program rules and I acknowledge that failure to do so may result in denial of discount funding and/or cancellation of funding commitments.

31   I understand that the discount level used for shared services is conditional. for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the service, receive an appropriate share of benefits from those services.

32   I recognize that I may be audited pursuant to this application. I will retain for five years any and all worksheets and other records that I rely upon to fill out this application, and, if audited, will make available to the Administrator such records.

33   I certify that I am authorized to submit this request on behalf of the above-named entities, that I have examined this request, and to the best of my knowledge. information, and belief, all statements of fact contained herein are true.

34 Signature of authorized person _Donald S Oakes_	**35** Date _11/17/01_
36 Printed name of authorized person _Donald Oakes_	
37 Title or position of authorized person _Superintendent of Education_	
38 Telephone number of authorized person: (_601_) _638-5122_ ext. _____	

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. **Secs. 502, 503(b),** or fine or imprisonment under Title **18** of the United States Code, **18** U.S.C. **Sec.** 1001.

The Americans with Disabilities Act, the Individuals with Disabilities Education Act and the **Rehabilitation** Act may impose obligations on entities to make the services purchased with these discounts accessible to and **usable** by people with disabilities.

NOTICE 'O INDIVIDUALS Section 54.504 of the Federal Communications Commission's rules |uires all schools and librarie lering services that are eligible for and seeking universal service discounts to file this Services Ordered and Certification Form (FCC Form 471) with the Universal Service Administrator, 47 C.F.R. § 54 504 The collection of information stems from the Commission a th rity l Section 5 l f the Communications Act of 1934, as amended, 47 U.S.C. § 254. The data in the report will be used to ensure that schools and libraries comply with the competitive bidding requirement contained in 47 C.F.R. § 54.504. All schools and libraries planning t l i ili ibl f i service discounts must file this form themselves or as part of a consortium.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control nu

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this form. We ill use the information you provide to determine whether approving this application is in the public interest. If we believe h a may be a violation or a | i l vi la tic of a FCC t t i, ig il iti , Jl or l , your application may be referred to the Fi leral. state, or l ig :y i ibli for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation oi order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) th FC C or (l) any k of th FCC; or (c) the United States Government is a party of a proceeding before the body or has an interest in the proceeding.

If you owe a past due debt to the Federal government, the taxpayer identification number (such as your social security number) and oth information you provide may also be disclosed to the Department of the Treasury Financial Management Service, other F l il ig ncie li your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide the information to these agencies through the matching of computer records when authorized.

If you do not provide the information we request on the form, the FCC may delay processing of your application or may return your application without action.

The foregoing Notice is required by the Privacy Act of 1974, lt L. N 93-579, lt , l, 5 U.S.C. § 552, and the l Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. § 3501, et seq.

Public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of information. ! l comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the reporting burden to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, C 5·

Please submit this form to:

SLD-Form 471
P.O. Box 7026
Lawrence, Kansas 66044-7026

For xpress delivery ervices or **U.S.**Postal Service, Return Receipt Requested, mail this form to:

SLD-Form 471
c/o Ms. Smith
3833 Greenway Drive
Lawrence, Kansas 66046
(888) 203-8100